

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Lynn Jenkins For Congress

ADDRESS (number and street)

PO Box 1441

Check if different
than previously
reported. (ACC)

Topeka

KS

66601-1441

2. FEC IDENTIFICATION NUMBER ▼

C

C00433730

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

KS

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

11 / 25 / 2014

through

M M / D D / Y Y Y Y

12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Heather Grote

Signature of Treasurer

Heather Grote

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 16

Write or Type Committee Name

Lynn Jenkins For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8300	12890.8
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8300	12890.8
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30697.96	87521.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	30697.96	87521.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	308719.18	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 16

Write or Type Committee Name

Lynn Jenkins For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

7700

9200

(ii) Unitemized.....

100

100

(iii) TOTAL of contributions from individuals ▶

7800

9300

(b) Political Party Committees.....

0

490.8

(c) Other Political Committees (such as PACs).....

500

3100

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

8300

12890.8

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0

0

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0

0

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

1756.49

1756.49

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

10056.49

14647.29

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30697.96	87521.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	1000	1000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31697.96	88521.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	330360.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10056.49
25. SUBTOTAL (add Line 23 and Line 24).....	340417.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31697.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	308719.18

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

James R Nolan

A.

Mailing Address 3019 W 84th Terrace

City

Leawood

State

KS

Zip Code

66206-1312

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Nolan Company

Occupation

Chairman of the Board

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Transaction ID : A-CF14475

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

Dana Anderson

B.

Mailing Address 100 Fall Creek Road

City

Lawrence

State

KS

Zip Code

66049-9067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Macerich

Occupation

Vice Chairman of the Board

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : A-CF14477

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

Dana Anderson

C.

Mailing Address 100 Fall Creek Road

City

Lawrence

State

KS

Zip Code

66049-9067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Macerich

Occupation

Vice Chairman of the Board

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : A-CF14478

Amount of Each Receipt this Period

2600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7700.00

7700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Small Business Council of America-PAC, Inc.

Mailing Address PO Box 4299

City

Columbus

State

GA

Zip Code

31914-0299

FEC ID number of contributing
federal political committee.

C C00149948

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M / D D / Y Y Y Y
12 11 2014

Transaction ID : A-CF14479

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

State of Kansas

A.

Mailing Address Docking State Office Bldg

City

Topeka

State

KS

Zip Code

66625-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1680.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2014

Transaction ID : A-MF14480

Amount of Each Receipt this Period

1680.51

refund, tax overpayment

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1680.51

1680.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Intrust Card Center

Mailing Address PO Box 2121

City	State	Zip Code
Wichita	KS	67201-2121

Purpose of Disbursement
credit card payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

285.15

Transaction ID : B-E-14481

Original vendors exceeding reporting threshold itemized as memo transactions.

B. i360, LLC

Mailing Address PO Box 37046

City	State	Zip Code
Baltimore	MD	21297-3046

Purpose of Disbursement
data subscription

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2014

Amount of Each Disbursement this Period

500

Transaction ID : B-E-14484

C. 3 Dog Consulting

Mailing Address 104 Hume Avenue

City	State	Zip Code
Alexandria	VA	22301-1015

Purpose of Disbursement
Fundraising

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2014

Amount of Each Disbursement this Period

5000

Transaction ID : B-E-14454

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5785.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Intrust Card Center

Mailing Address PO Box 2121

City	State	Zip Code
Wichita	KS	67201-2121

Purpose of Disbursement
credit card payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

2179.55

Transaction ID : B-E-14482

Original vendors exceeding reporting threshold itemized as memo transactions.

B. U-Haul

Mailing Address 3825 SW Topeka Boulevard

City	State	Zip Code
Topeka	KS	66609-1231

Purpose of Disbursement
sign collection for storage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2014

Amount of Each Disbursement this Period

398.72

Transaction ID : B-S-8700

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

c. U-Haul

Mailing Address 3825 SW Topeka Boulevard

City	State	Zip Code
Topeka	KS	66609-1231

Purpose of Disbursement
sign collection for storage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2014

Amount of Each Disbursement this Period

796.22

Transaction ID : B-S-8701

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

SUBTOTAL of Disbursements This Page (optional).....

2179.55

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. U-Haul

Mailing Address 3825 SW Topeka Boulevard

City	State	Zip Code
Topeka	KS	66609-1231

Purpose of Disbursement
sign collection for storage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2014

Amount of Each Disbursement this Period

866.73

Transaction ID : B-S-8702

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

B. Kyle Abbott

Mailing Address 1081 U Road

City	State	Zip Code
Lebanon	KS	66952-5593

Purpose of Disbursement
Travel: mileage

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) General 2014

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2014

Amount of Each Disbursement this Period

1464

Transaction ID : B-E-14474

c. The Levatino GroupMailing Address 20 F Street NW
Suite 500

City	State	Zip Code
Washington	DC	20001-6703

Purpose of Disbursement
Fundraising: food and beverage

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2014

Amount of Each Disbursement this Period

3575

Transaction ID : B-E-14472

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5039.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Kansas Withholding Tax

Mailing Address 915 SW Harrison Street

Date of Disbursement

M M	D D	Y Y Y Y
12	10	2014

City	State	Zip Code
Topeka	KS	66612-1505

Amount of Each Disbursement this Period

884.29

Purpose of Disbursement
tax payment

001

Transaction ID : B-E-14464

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Grote and Associates, Inc.Mailing Address 28 N 8th Street
Suite 317

Date of Disbursement

M M	D D	Y Y Y Y
12	29	2014

City	State	Zip Code
Columbia	MO	65201-7708

Amount of Each Disbursement this Period

1500

Purpose of Disbursement
compliance and bookkeeping

001

Transaction ID : B-E-14487

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. United States Treasury

Mailing Address Internal Revenue Serv

Date of Disbursement

M M	D D	Y Y Y Y
12	10	2014

City	State	Zip Code
Ogden	UT	84201-0005

Amount of Each Disbursement this Period

7463.59

Purpose of Disbursement
tax payment

001

Transaction ID : B-E-14465

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9847.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Targeted VictoryMailing Address 1033 N Fairfax Street
40

City Alexandria State VA Zip Code 22314-1547

Purpose of Disbursement
credit card processing fee

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	01	2014

Amount of Each Disbursement this Period

180

Transaction ID : B-E-14476

B. Intrust Card Center

Mailing Address PO Box 2121

City Wichita State KS Zip Code 67201-2121

Purpose of Disbursement
credit card payment

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
12	19	2014

Amount of Each Disbursement this Period

4972.23

Transaction ID : B-E-14483

Original vendors exceeding reporting threshold itemized as memo transactions.

c. Bearnaise Restaurant

Mailing Address 315 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement
food and beverage

003

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
11	13	2014

Amount of Each Disbursement this Period

1151.53

Transaction ID : B-S-8710

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5152.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Ramada Topeka West

Mailing Address 605 SW Fairlawn Road

City	State	Zip Code
Topeka	KS	66606-2335

Purpose of Disbursement
volunteer lodging

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

927.54

Transaction ID : B-S-8708

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

B. Intrust Card Center

Mailing Address PO Box 2121

City	State	Zip Code
Wichita	KS	67201-2121

Purpose of Disbursement
adjustment due transfer to new

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2014

Amount of Each Disbursement this Period

1865.82

Transaction ID : B-S-8712

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

c. USPS

Mailing Address 424 S Kansas Avenue

City	State	Zip Code
Topeka	KS	66603-3420

Purpose of Disbursement
postage

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

19.99

Transaction ID : B-S-8705

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. The Congressional Institute

Mailing Address 1700 Diagonal Road, Suite 730

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
leadership retreat

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 19 / 2014

Amount of Each Disbursement this Period

738

Transaction ID : B-S-8711

[MEMO ITEM]

Subitemization of Intrust Card Center(12/19/14)

B. Covington & Burling, LLP

Mailing Address 1201 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20004-2401

Purpose of Disbursement
legal services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 23 / 2014

Amount of Each Disbursement this Period

720.95

Transaction ID : B-E-14486

C. Grote and Associates, Inc.Mailing Address 28 N 8th Street
Suite 317

City	State	Zip Code
Columbia	MO	65201-7708

Purpose of Disbursement
bookkeeping and compliance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 25 / 2014

Amount of Each Disbursement this Period

1500

Transaction ID : B-E-14459

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2220.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Ashley Jones-Wisner Photography

Mailing Address 5814 Silverstone Drive

City	State	Zip Code
Lawrence	KS	66049-8500

Purpose of Disbursement
photography

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2014

Amount of Each Disbursement this Period

250

Transaction ID : B-E-14473

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

250.00

30474.76

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

A. Lead Your Nation Now Pac (LYNN PAC)

Mailing Address PO Box 1872

City State Zip Code
 Topeka KS 66601-1872

Purpose of Disbursement
 contribution from BOMAPAC deposited in Jenkins for Congress but check
 intended for LYNN PAC

Candidate Name

Lead Your Nation Now Pac (LYNN PAC)

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
 12 31 2014

Amount of Each Disbursement this Period

1000

Transaction ID : B-E-14504

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00